

**WAREHOUSE/ MINI-STORAGE /  
INDUSTRIAL PROPERTY  
INCOME AND EXPENSE SURVEY**

CITY OF ALEXANDRIA  
DEPARTMENT OF REAL ESTATE ASSESSMENTS  
703.838.4646



Tax Assessment Map #

Land Use Code

Databank #

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**RETURN TO:**  
CITY OF ALEXANDRIA  
DEPARTMENT OF REAL ESTATE ASSESSMENTS  
P. O. BOX 178  
ALEXANDRIA, VIRGINIA 22313-1501

Dear Property Owner:

The Department of Real Estate Assessments is in the process of collecting and analyzing information for the annual reassessment of real estate located in the City of Alexandria. This is an official request pursuant to Section 58.1-3294 of the Code of Virginia that requires you to furnish this office with income and expense data for any income producing properties for calendar year 2005. This request is also in compliance with Section 3-2-186 of the Alexandria City Code. All information submitted will be kept strictly confidential under the stipulations of Section 58.1-3 of the Code of Virginia.

This survey form is to be completed by the property owner or a duly authorized agent, showing the gross income (at 100% occupancy), vacancies and expenses for the above referenced property. The information should encompass the 2005 calendar year.

Income information related to calendar year 2005 that you may have previously submitted to the Department of Real Estate Assessments or to the Board of Equalization as part of a review or an appeal, **must be resubmitted at this time to satisfy this request.** In addition to the information requested as part of this survey, we request that you submit any other income or expense information which you believe to be relevant to the assessment of your property. The income information requested by the Department of Finance in regard to business licenses is not associated with this request.

If the property is 100% owner occupied, you do not need to complete this form. Please note the reason that you are eligible for exclusion on the face of this form and return it.

The enclosed self-addressed envelope is provided for your convenience. The income information must be returned to our office no later than **May 1, 2006** or postmarked by the U. S. Postal Service no later than **May 1, 2006**. I would like to remind you that any Request for Review of Assessment filed with this office, or any Appeal of Assessment filed with the Board of Equalization, which is based upon the income or expenses attributable to your property will not be considered unless this information has been filed on time.

If you have any questions regarding this matter, or wish to discuss this request form with a member of our appraisal staff, please call between 8:00 a.m. and 5:00 p.m., Monday through Friday. Your cooperation and timely response to this legal requirement will be greatly appreciated.

Sincerely,

A handwritten signature in cursive script, reading "Cynthia A. Smith-Page".

Cynthia A. Smith-Page, ASA  
Director

Enclosure

The Income and Expense information must be placed on this form. No alternative forms may be used. A detailed set of instructions is part of this survey. These instructions are provided to assist you in completing the form. If you should have any questions or need assistance please call our office at 703.838.4646.

#### A. CERTIFICATION

State law requires certification by the owner or officially authorized representative. Please type or print all information except signature.)

Name of building \_\_\_\_\_

Property address \_\_\_\_\_

Type of project or building \_\_\_\_\_

Owner(s) name(s) \_\_\_\_\_

All information including the accompanying schedules and statements has been examined by me and to the best of my knowledge and belief is true, correct, and complete. Contact person \_\_\_\_\_

Management firm \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_ Title \_\_\_\_\_

Print name \_\_\_\_\_

#### B. PHYSICAL VACANCY INFORMATION

- 1 Space vacant January 1 (2006) \_\_\_\_\_ sq. ft. rentable
- 2 Space vacant January 1 (2005) \_\_\_\_\_ sq. ft. rentable

#### C. ASKING RENT INFORMATION/COST INFORMATION

- 1 Current ASKING rent per sq. ft. for vacant space \_\_\_\_\_
- 2 Estimated total construction costs if built within the last five years \_\_\_\_\_
- 3 Price of land if purchased within the last five years \_\_\_\_\_
- 4 TOTAL COSTS \_\_\_\_\_

Note: A detailed construction cost breakout report may be substituted in lieu of the above information.

#### D. DEBT SERVICE INFORMATION (within last 5 years)

Loan Amount	Loan Date	Term	Int. Rate (%)	Payment (P&I)	Payment Frequency (Mo. or Yr.)
1.					
2.					
3.					
4.					

Has there been a professional appraisal on this real property in the last five years? ☐ Yes ☐ No

If yes, appraiser's estimate of value \$ \_\_\_\_\_ Date of value \_\_\_\_\_

**CONFIDENTIAL**

**E. ANNUAL INCOME (for calendar year 2005)**

Rental Income:

- 01 Potential rental income ..... \_\_\_\_\_
- 02 Sales of utilities/services ..... \_\_\_\_\_
- 03 Overage/Percentage rental ..... \_\_\_\_\_
- 04 Other rental income (Specify: \_\_\_\_\_ ) ..... \_\_\_\_\_
- 05 TOTAL POTENTIAL INCOME (add lines 1, 2, 3, and 4) ..... \_\_\_\_\_
- 06 Income loss from vacancy (2005) ..... \_\_\_\_\_
- 07 Income loss from bad debts (2005) ..... \_\_\_\_\_
- 08 TOTAL INCOME LOSS (add lines 6 and 7) ..... \_\_\_\_\_
- 09 Actual rental income received (subtract line 8 from line 5) ..... \_\_\_\_\_

Other Income:

- 10 Common area maintenance reimbursement ..... \_\_\_\_\_
- 11 Interest income ..... \_\_\_\_\_
- 12 Insurance reimbursement ..... \_\_\_\_\_
- 13 Operating expense reimbursement ..... \_\_\_\_\_
- 14 Tax escalation or reimbursement ..... \_\_\_\_\_
- 15 Parking and special areas ..... \_\_\_\_\_
- 16 Other rental income (Specify: \_\_\_\_\_ ) ... \_\_\_\_\_
- 17 Miscellaneous (Specify: \_\_\_\_\_ ) . \_\_\_\_\_
- 18 Miscellaneous (Specify: \_\_\_\_\_ ) . \_\_\_\_\_
- 19 Miscellaneous (Specify: \_\_\_\_\_ ) . \_\_\_\_\_
- 20 Miscellaneous (Specify: \_\_\_\_\_ ) . \_\_\_\_\_
- 21 TOTAL ACTUAL INCOME (Sum of lines 09 through 20) ..... \_\_\_\_\_

**F. CAPITAL IMPROVEMENTS, RENOVATIONS**

Have there been Capital Improvements or Capital Renovations to the property during this reporting period?

☐ Yes ☐ No If yes, please provide total cost here and attach a detailed list on a separate page.

Total capital cost \_\_\_\_\_

## G. ANNUAL OPERATING EXPENSES

### Utilities:

- 22 Water and sewer .....  
23 Electricity (excludes HVAC) .....  
Electricity (includes HVAC) .....  
24 Primary heating fuel (Specify: ..... ) .....  
25 Other fuel (Specify: ..... ) .....  
TOTAL UTILITIES .....

### Maintenance & Repairs:

- 26 Maintenance payroll (including payroll taxes and benefits) .....  
27 HVAC repairs .....  
28 Electric/plumbing repairs .....  
29 Elevator repairs .....  
30 Roof repairs .....  
31 Other common area or exterior repairs .....  
32 Redecorating costs (carpet, paint, etc.) .....  
33 Miscellaneous repairs (Specify: ..... ) .....  
TOTAL MAINTENANCE & REPAIRS .....

### Management and Administrative:

- 34 Management fees .....  
35 Other administrative/payroll (including payroll taxes and benefits) .....  
TOTAL MANAGEMENT AND ADMINISTRATIVE .....

### Services:

- 36 Janitorial/cleaning (payroll/contract) .....  
37 Landscape (grounds maintenance) .....  
38 Trash .....  
39 Security .....  
40 Snow removal .....  
TOTAL SERVICES .....

### Insurance and Taxes (excluding payroll taxes):

- 41 Insurance, Fire, Casualty (one year) .....  
42 Other taxes, fees .....  
43 Real Estate taxes .....  
TOTAL INSURANCE AND TAXES .....

### Total Operating Expenses:

- 44 Total Expenses (sum of lines 22 through 43) .....

## H. NET OPERATING INCOME (Section E, line 21 less Section G, line 44) .....

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